| | | | | | | • • | | ber:2070-0093 | | |
|------------------|---|--|---|--------------------|---------------|-----------------------------|----------------|---|----------|-----------------|
| MPO. | RTANT: Type or print; read insti | ructions before completing | form) | | Approv | val Expires: 1/ | | | | Page 1 of 5 |
| 6 | · EPA | | FORM | Q | | | | FRTCRCOMMA | - | · · · · |
| | ec States | | | • • | | | 00913 | FRICKCOMINA | | |
| - | ironmental Protection | Se tion 313 of the mee Know Act of 1986, also Amendments and Reau | known as Title | III of | | | Toxic Coppe | Chemical, Catego er | ory or G | eneric Name |
| WHE | RE TO SEND COMPLETED FO | RMS: 1, TRI Data Process P.O.Box 1513 Lanham, MD 20 | | | | TATE OFFICE n Appendix F | | Enter "X" here is a revision For EPA use onl | | |
| lmp | ortant: See instruction | ns to determine wh | nen "Not Ap | plic | able (NA |)" boxes | sho | uld be check | ed. | |
| | | PART I. FACILITY | Y IDENTIFI | ICAT | ION IN | FORMAT | ION | | | |
| SEC | TION 1. REPORTING Y | EAR <u>2003</u> | | | | | | | | |
| SEC | TION 2. TRADE SECRE | TINFORMATION | | | | | | | | |
| 2.1 | Are you claiming the toxic cher Yes (Answer question 2. Attach substantiati | 2; X NO (| rade secret? Do not answer 2. o to Section 3) | .2; | اووا | this copy Answer only if | "YES" | Sanitized [in 2.1} | Ur | nsanitized |
| SEC | TION 3. CERTIFICATION | N (Important: Read a | nd sign afte | r con | pleting a | all form see | ction | s.) | | |
| inforr | eby certify that I have reviewed to mation is true and complete and g data availble to the preparers of | that the amounts and value | | | | | | | · | |
| Name | and official title of owner/opera | tor or senior management of | official: | | | Signature: | | | | Date Signed: |
| Thoma | as L. Warren Director, DECAM | | | | | 1 | | | _ | 06/01/2004 |
| SEC | TION 4. FACILITY IDEN | TIFICATION | | | | | | | | |
| 4.1 | | THE TOTAL OF THE T | | TRI Fa | acility ID Nu | mber 809 | 13FRT | CRCOMMA | | |
| | or Establishment Name | | | Facility | or Establishm | | | idress (if different fro | m street | address) |
| J.S. A | Army Fort Carson | | | | | | | | | |
| Street 1638 I | Elwell Street, Bldg 6236 | | | Mailing NA | Address | | | | | |
| City/Co | ounty/State/Zip Code | | | City/Sta | te/Zip Code | | | | | Country (Non-US |
| ort C | arson El Paso | CO : | 80913-4356 | | | | | | | |
| 4.2 | This report contains informati (Important: check a or b; che | | | n entire cility | , р. С | Part of a facility | с. [| X A Federal facility | d. [| Goco |
| 4.3 | Technical Contact Name | John Cloonan | | | | | | hone Number (inc 526-8004 | clude a | rea code) |
| | Email Address | john.cloonan@carson.a | my.mil | | | | | | | |
| 4.4 | Public Contact Name | John Cloonan | | | | | <u> </u> | hone Number (inc 526-8004 | clude ar | rea code) |
| 4.5 | SIC Code (s) (4 digits) | Primary | b. | C. | | d. | | e. | f. | |

| SECTION 5. PARENT CO | OMPANY INF | ORMATION |
|----------------------|------------|----------|
|----------------------|------------|----------|

Degrees

4.8

a. CO2210020150

4.6

4.7

b.

a. NA

Latitude

Dun & Bradstreet Number(s) (9 digits)

Minutes

EPA Identification Number (RCRA I.D. No.) (12 characters)

| SEC | SECTION 5. PARENT COMPANY INFORMATION | | | | | | | | | | | | |
|-----|---------------------------------------|-----|----------------------------|--|--|--|--|--|--|--|--|--|--|
| 5.1 | Name of Parent Company NA | | U.S. Department of Defense | | | | | | | | | | |
| 5.2 | Parent Company's Dun & Bradstreet Num | ber | NA X | | | | | | | | | | |

a. CO0021181

b. CO0034771

Seconds

45

4.9

Longitude

Facility NPDES Permit Number(s) (9 characters)

Degrees

104

4.10

a. NA

b.

Minutes

Seconds

45

Underground Injection Well Code (UIC) I.D. Number(s) (12 digits)

| | | | | | Page 2 of | | | | | | | | |
|--|---|-----------------------|--|-----------------------|--|--|--|--|--|--|--|--|--|
| | | | | | RI Facility ID Number | | | | | | | | |
| | EPA S | ORN | R | Ŀ | YO TRE SHITCH DOMINAN | | | | | | | | |
| | PART II. CHEMICAL - | SPECI | FIC INFORMATION | [3 | oxic Chemical, Category or Generic Name | | | | | | | | |
| | | | | C | Copper | | | | | | | | |
| SEC | CTION 1. TOXIC CHEMICAL IDE | NTITY | (Important: DO NOT comple | te this : | section if you completed Section 2 below.) | | | | | | | | |
| | CAS Number (Important: Enter only one numbe | r exactly as | it appears on the Section 313 list. Enter catego | ary code i | reporting a chemical category.) | | | | | | | | |
| 1.1 | 7440-50-8 | | | | | | | | | | | | |
| 1.2 | | nportant: Er | Enter only one name exactly as it appears on the Section 313 list.) | | | | | | | | | | |
| | Copper | | 4. O. Co. | | Andrew Market Andrew Salver N | | | | | | | | |
| 1.3 | Generic Chemical Name (Important: Complete NA | only if Part | 1, Section 2.1 is checked "Yes". Generic Name | must be | structurally descriptive.) | | | | | | | | |
| | 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 | | | | | | | | | | | | |
| SE | CTION 2. MIXTURE COMPONEN | T IDEN | TITY (Important: DO NOT comple | te this | section if you completed Section 1 above.) | | | | | | | | |
| | Generic Chemical Name Provided by Supplier | Important: I | Maximum of 70 characters, including numbers, i | letters, sp | paces, and punctuation.) | | | | | | | | |
| 2.1 | NA | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| SEC | TION 3. ACTIVITIES AND USES (Important: Check all that a | | E TOXIC CHEMICAL AT THE FA | ACILIT | Υ | | | | | | | | |
| 3.1 | | pply.) | | 3.3 | Otherwise use the toxic chemical: | | | | | | | | |
| | (Important: Check all that a | pply.) | | | | | | | | | | | |
| 3.1 | (Important: Check all that a | pply.) | | | | | | | | | | | |
| 3.1 | (Important: Check all that a Manufacture the toxic chemical Produce b. Import | 3.2 | Process the toxic chemical: | 3.3 | Otherwise use the toxic chemical: | | | | | | | | |
| 3.1 | Manufacture the toxic chemical Produce b. Import If produce or import: | 3.2 a. | Process the toxic chemical: As a reactant | 3.3 a. | Otherwise use the toxic chemical: As a chemical processing aid | | | | | | | | |
| 3.1 | Manufacture the toxic chemical Produce b. Import If produce or import: For on-site use/processing | 3.2 a. b. | Process the toxic chemical: As a reactant X As a formulation component | 3.3 a. b. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid | | | | | | | | |
| 3.1 | Manufacture the toxic chemical Produce b. Import If produce or import: For on-site use/processing For sale/distribution | 3.2 a. b. c. | Process the toxic chemical: As a reactant X As a formulation component As an article component | 3.3 a. b. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid | | | | | | | | |
| 3.1 a. c. d. e. f. | Manufacture the toxic chemical Produce b. Import If produce or import: For on-site use/processing For sale/distribution As a byproduct As an impurity | a. b. c. d. | Process the toxic chemical: As a reactant X As a formulation component As an article component Repackaging As an impurity | 3.3 a. b. c. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid | | | | | | | | |
| 3.1 a. c. d. e. f. | Comportant: Check all that a Manufacture the toxic chemical Produce b. Import | a. b. c. d. e. | Process the toxic chemical: As a reactant X As a formulation component As an article component Repackaging As an impurity | 3.3 a. b. c. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid Ancillary or other use | | | | | | | | |
| 3.1 a. c. d. e. f. SEC | Comportant: Check all that a Manufacture the toxic chemical Produce b. Import | a. b. c. d. e. THE To | Process the toxic chemical: As a reactant As a formulation component As an article component Repackaging As an impurity OXIC CHEMICAL ONSITE AT Allom instruction package.) | 3.3 a. b. c. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid Ancillary or other use ME DURING THE CALENDAR YEAR | | | | | | | | |
| 3.1 a. c. d. e. f. SEC | Manufacture the toxic chemical Produce b. Import If produce or import: For on-site use/processing For sale/distribution As a byproduct As an impurity TION 4. MAXIMUM AMOUNT OF 04 (Enter two-digit TION 5. QUANTITY OF THE TOX | a. b. c. d. e. THE To | As a reactant As a formulation component As an article component Repackaging As an impurity OXIC CHEMICAL ONSITE AT Allom instruction package.) EMICAL ENTERING EACH ENVI | a. b. c. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid Ancillary or other use ME DURING THE CALENDAR YEAR IENTAL MEDIUM ONSITE of Estimate C. % From Stormwater | | | | | | | | |
| 3.1 a. c. d. e. f. SEC | Manufacture the toxic chemical Produce b. Import | a. b. c. d. e. THE To | As a reactant As a formulation component As an article component Repackaging As an impurity OXIC CHEMICAL ONSITE AT Allom instruction package.) EMICAL ENTERING EACH ENVI | 3.3 a. b. c. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid Ancillary or other use ME DURING THE CALENDAR YEAR IENTAL MEDIUM ONSITE of Estimate C. % From Stormwater | | | | | | | | |
| 3.1 a. c. d. e. f. SEC | Manufacture the toxic chemical | a. b. c. d. e. THE To | As a reactant As a formulation component As an article component Repackaging As an impurity OXIC CHEMICAL ONSITE AT Allom instruction package.) EMICAL ENTERING EACH ENVI | 3.3 a. b. c. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid Ancillary or other use ME DURING THE CALENDAR YEAR IENTAL MEDIUM ONSITE of Estimate C. % From Stormwater | | | | | | | | |
| 3.1 a. c. d. e. f. SEC 4.1 SEC | Manufacture the toxic chemical Produce b. Import | a. b. c. d. e. THE TO | As a reactant As a formulation component As an article component Repackaging As an impurity OXIC CHEMICAL ONSITE AT Allom instruction package.) EMICAL ENTERING EACH ENVI | 3.3 a. b. c. | Otherwise use the toxic chemical: As a chemical processing aid As a manufacturing aid Ancillary or other use ME DURING THE CALENDAR YEAR IENTAL MEDIUM ONSITE of Estimate C. % From Stormwater | | | | | | | | |

0.5

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box

(example: 1,2,3, etc.) * For Dioxin or Dioxin-like compounds, report in grams/year

NΑ

and indicate the Part II, Section 5.3 page number in this box.

Clover Ditch

5.3.1 5.3.2

5.3.3

М

EPA Form 9350-1 (Rev. 2/2004) - Previous editions are obsolete.

^{**} Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

| PART | II. CHEMIC | | FA FO | UED) | TRI Facility ID Number &)(13 'R 'C R COMI 1/2 Toxic Chemical, Category, or Generic Name Copper | | | | | | |
|---|--|---------------|------------|------------|---|-------|-----------------------------|---------|---|-------|-------------|
| SECTIO | ON 5. QUANTI | TY OF TH | HE TOXI | C CHEMIC | CAL EN | TERIN | G EACH | ENVIR | ONMENTAL MEDIUM ON | ISITE | (Continued) |
| <u></u> | | | NA | A. Total R | | | /ear*) (ente r estimate) | r range | B. Basis of Estimate (enter code) | | |
| 5.4.1 | Underground Injeto Class Wells | ection onsite | e <u>X</u> | | | | | | | | |
| 5.4.2 | Underground Injeto Class II-V We | | e X | | | | | | | | |
| 5.5 | Disposal to land | onsite | | | | | | | | | |
| 5.5.1.A | RCRA Subtitle C | landfills | X | | | | | | | | |
| 5.5.1.B | Other landfills | | X | | | | | - | | | |
| 5.5.2 | Land treatment/a farming | application | X | | | | · | | *** | | • |
| 5.5.3A | RCRA Subtitle C Impoundments | Surface | X | | | | | | | | |
| 5.5.3B | Other surface im | poundment | ts X | | | | | | | | |
| 5.5.4 | Other disposal | | X | | | | | | | | |
| SECTIO | ON 6. TRANSF | ERS OF | THE TO | XIC CHEM | IICAL II | N WAS | TES TO | OFF-SI | TE LOCATIONS | | |
| 6.1 DIS | CHARGES TO | PUBLIC | LY OWN | IED TREA | TMENT | WOR | KS (PO | ΓWs) | | | |
| 6.1.A To | tal Quantity Tra | ansferred | to POTW | s and Bas | is of Est | imate | | | | | |
| | Total Transfers (enter range coo | •• | | | | 6.1.4 | A.2 Basis enter (| | ate | | |
| | | | NA | | | | | | | | |
| 6.1.B. 1 | | Name N | A | | • | • | | | | | |
| POTW A | ddress | | | | | | | | | | |
| City | | | | | State | | County | | | Zip | |
| 6.1.B. | POTW | Name | | | | | | | | | |
| POTW A | ddress | | | | | | | | | | |
| City | | | | | State | | County | | • | Zip | |
| if additional pages of Part II, Section 6.1 are attached, indicate the total number of pages in this box and indicate the Part II, Section 6.1 page number in this box (example: 1,2,3, etc.) | | | | | | | | | | | |
| SECTIO | ECTION 6.2 TRANSFERS TO OTHER OFF-SITE LOCATIONS | | | | | | | | | | |
| 6.2. <u>1</u> | i.2. 1 Off-Site EPA Identification Number (RCRA ID No.) NA | | | | | | | | | | |
| Off-Site L | Off-Site Location Name All Alum. and Metals Recycling | | | | | | | | | | |

* For Dioxin or Dioxin-like compounds, report in grams/year

80906

Yes

Country (Non-US)

No

Zip

Is location under control of reporting facility or parent company?

412 E. Cheyenne Road

State

CO

County

El Paso

Off-site Address

Colorado Springs

City

^{**} Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

| | | ſ | | ORM | | | TRI Fac | ility ID I | Number | | | | | |
|---|--------------------------|---------------------------|-----------------------|---------------------|-----------------------|--------------------|-----------------|-------------------------------------|--|-------------|----------|-----------------------------|---------------------|--------------|
| | | | £ 0! 13 = | RKR | OM M | | | | | | | | | |
| PARTII. CH | IEwiiC/ | iL SP | *:CIF | IC INF | ŪKM | ATION | icc | ONTINUED) | ∫oxic C | hemica | , Catego | огу, ог Сег | neric Nam | ie |
| | | | | | | | | | Copper | | | | | |
| SECTION 6.2 | TRANS | FERS T | о отн | IER OF | F-SITI | E LOCAT | IONS | S (Continued) | | | | | | |
| A. Total Transfe (enter range o | ers (poun code** or e | ds/year*) stimate) | | | Basis of (enter co | f Estimate ode) | | | C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code) | | | | | e) |
| 1. 60000 | | | | 1. | | | M | | 1. M24 | | | | | |
| 2. NA | | | | 2. | | | | | 2. | | | | | |
| 3. | | | | 3. | | | | | 3. | | | | | |
| 4. | | | | 4. | | | | | 4. | | | | | |
| 6.2. <u>2</u> Off | f-Site EP/ | A Identific | ation N | umber (| RCRA I | D No.) | | NA | | | | | | |
| Off-Site location | Name | Colorado | Iron Me | tal Inc. | | | | | | | | | | |
| Off-site Address | 1400 | erry | | | | | | | | | | | | |
| City Fort Colli | ns | | | State | со | County | Larim | ner | | Zíp | 80524 | | Country (Non-US) | } |
| Is location und | er contro | of report | ting faci | lity or pa | arent co | mpany? | | | | Yes | ; | X | No. | • |
| A. Total Transfe (enter range (| | | | | Basis of (enter co | f Estimate | | | C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code) | | | | a) | |
| 1. 74000 | | | | 1. | М | | | | 1. M24 | | | | | |
| 2. NA | | | | 2. | | | | | 2. | | | | | |
| 3. | | | | 3. | | | | | 3. | | | | | |
| 4. | | | | 4. | | | | | 4. | | | | | |
| SECTION 7A | . ONSIT | TE WAS | TE TRI | EATME | NT ME | THODS | AND | EFFICIENCY | | | | | | |
| X Not App | licable (NA | A) - waste | stream (| containin | g the tox | | applie or ch | ed to any emical category. | | | | · | | |
| General Waste Stream (enter code) | b. V [r | Waste Trea enter 3-cha | atment M aracter o | ethod(s) ode(s)] | Sequen | ce | | c. Range of Influe Concentration | | | | e. Based on Operating Data? | | a? |
| 7A.1a | 7A.1b | <u> </u> | 1 _ | | 2 | | | 7A.1c | | 7A.1d | | | 7A.16 | , |
| | 3 6 | | 4 7 | | 5 8 | | $\dashv \mid$ | | | | % | | Yes | No |
| 7A.2a | 7A.2b | | 1 | | 2 | | + | 7A.2c | | 7A.2d | | | 7A.2 | |
| | 3 | | 4 | | 5 | | $\exists \mid$ | | | | % | | Yes | No |
| | 6 | | 7 | | 8 | | | | | | | | | |
| 7A.3a | 7A.3b | <u> </u> | 1 | | 2 | | | 7A.3c | | 7A.3d | | | 7A.3e |) |
| | 3 | | 4 | | 5 | | 41 | | | | % | | Yes | No |
| | 6 | , | 7 | | 8 | <u> </u> | 4 | | | | | | · | : |
| 7A.4a | 7A.4b | | ¹ - | | _ ² | | 4 | 7A.4c | | 7A.4d | | | 7 A.4 6 | , |
| | 4 | 5 | | | | | | % | | Yes | No | | | |
| 74.50 | 7A.5a 7A.5b 1 | | | | | 2 7A.5c | | | | 7A.5d 7A.5e | | | | |
| /A.Şa | 3 | <u>'</u> | 4 | 2 7A.5c | | | | - | A.Su | | | Yes | No | |
| | 6 | $\neg \neg$ | 7 | | ٦ ° | | \dashv | | | | % | | 165 | , NO |
| If additional page | | II, Section | | are attac | | dicate the f | otal n | umber of pages in | n this box | | | | | |

and indicate the Part II, Section 6.2/7A page number in this box:

(example: 1,2,3, etc.)

^{*} For Dioxin or Dioxin-like compounds, report in grams/year

| - | TRI Facility ID Number |
|---|--|
| | 3071CFr TOF COMIVIA |
| | roxic Charuical, Catagory, or Contrie Name |
| | Copper |

| | FDΔF | ORN K | | | TRI Facility ID | | |
|----------|--|---|---------------------|---------------------------|----------------------------|-----------------|-------------------------------|
| | | | | | 30 71675 TO HIG | | |
| PA. | RT II. CHEMICAL SPACIFI | CINFORMATIC | N (CON | TINCED, | Toxic Chamica | l, Category, or | Conorio Name |
| | | | | | Copper | | |
| SECT | ION 7B. ON-SITE ENERGY RE | COVERY PROCES | SES | | | | |
| X | | e if no on-site energy recontaining the toxic chemical | | | 1 | | |
| | Energy Recovery Methods [enter 3-chara | acter code(s)] | | | | | |
| | 1 | 2 | | | 3 | i | |
| | ION 7C. ON-SITE RECYCLING | | | | | | |
| <u>×</u> | | e if no on-site recyling is a staining the toxic chemica | | | | | |
| | Recycling Methods [enter 3-character co | ode(s)] | | | | | |
| 1 _ | 2 | 3 | | _ 4 _ | | 5 | |
| 6 | 7 | 8 · | | _ 9 | • • | 10 | |
| SECT | ION 8. SOURCE REDUCTION | AND RECYCLING A | CTIVITIE | S | | | |
| | | Column A Prior Year | | olumn B Reporting Year | Column C Following Year | Secor | Column D nd Following Year |
| | | (pounds/year*) | (pou | inds/year*) | (pounds/year*) | (| pounds/year*) |
| 8.1 | | | 1 | | 1 | 1 | |
| 8.1a | Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills | NA | NA | | NA | NA | |
| 8.1b | Total other on-site disposal or other releases | NA | NA | | . NA | NA | |
| 8.1c | Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills | NA | NA | | NA . | NA | |
| 8.1d | Total other off-site disposal or other releases | NA | NA | | NA | NA | |
| 8.2 | Quantity used for energy recovery onsite | NA | NA | | NA | NA | |
| 8.3 | Quantity used for energy recovery offsite | NA | NA | | NA | NA | |
| 8.4 | Quantity recycled onsite | NA | NA | | NA | NA | |
| 8.5 | Quantity recycled offsite | 159600 | 1340 | 000 | 120000 | 120 | 0000 |
| 8.6 | Quantity treated onsite | NA | NA | | NA | NA | |
| 8.7 | Quantity treated offsite | NA | NA | | NA | NA | |
| 8.8 | Quantity released to the environment as or one-time events not associated with | | | | 0.5 | • | |
| 8.9 | Production ratio or activity index | | | | 0.84 | | |
| | Did your facility engage in any source re enter "NA" in Section 8.10.1 and answe | | chemical d | uring the reporting | g year? If not, | | |
| 8.10 | Source Reduction Activities [enter code(s)] | | Identify Activity (| enter codes) | | | |
| 8.10.1 | NA | a. | | b. | | c. | |
| 8.10.2 | | a. | | b. | | c. | |
| 8.10.3 | | a. | | b. | | c. | |
| 8.10.4 | | a. | b. | | | | |

8.11

Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box)

Yes

No

Х

| | OTANT: Time or wint mad inc | | 1 | | | rm Approved OM | | | | - 4.45 |
|-------------------------|---|---|--|---------------------|------------|------------------------------------|----------|--|-------------|-------------------------------------|
| | RTANT: Type or print; read inst | ructions before completing to | orm) | | Ар | proval Expires: 1/ | | acility ID Numbe | | Page 1 of 5 |
| 13 | EPA | J | FORM | R | | | | SERTCRCOMMA | | |
| | ec Situtes | | | | | | | | | · · · · · · · · · · · · · · · · · · |
| | ironmental Protection | Selation 313 of the Emery Know Act of 1986, also k Amendments and Reaut | known as Title | e III of | the Su | no-fired | | Chemical, Catego e compounds | gory or (| Generic Name |
| WHE | RE TO SEND COMPLETED FO | P.O.Box 1513 Lanham, MD 207 | • | | | E STATE OFFICE ns in Appendix F | | Enter "X" here is a revision For EPA use o | | |
| | | | | | | | | TO LE A dise o | <u>'''y</u> | |
| Imp | ortant: See instructio | ns to determine wh | en "Not A | pplic | able (| NA)" boxes | sho | uld be chec | ked. | |
| | | PART I. FACILITY | IDENTIF | ICAT | TION | INFORMAT | ION | | | |
| SEC | TION 1. REPORTING Y | EAR <u>2003</u> | | | | | | | | |
| SEC | TION 2. TRADE SECRE | T INFORMATION | | | | | | | | |
| 2.1 | Are you claiming the toxic che Yes (Answer question 2 Attach substantiat | .2; X NO (D | ade secret? o not answer 2 o to Section 3) | 2.2; | 2.2 | Is this copy (Answer only if | "YES" | Sanitized | U | Insanitized |
| SEC | TION 3. CERTIFICATIO | <u> </u> | , | er con | pletin | ig all form sec | ction | s.) | | |
| infor | eby certify that I have reviewed mation is true and complete and g data availble to the preparers | that the amounts and value | | | | | | | | |
| Name | and official title of owner/opera | tor or senior management of | fficial: | | | Signature: | | | | Date Signed: |
| Thom | as L. Warren Director, DECAM | | • • • | | | | | | | 06/01/2004 |
| SEC | TION 4. FACILITY IDEN | TIFICATION | | | | . | | | | |
| 4.1 | | | | TRI F | acility ID | Number 809 | 13FR7 | CRCOMMA | | |
| Facility | or Establishment Name | | | Facility | or Establ | ishment Name or Ma | iling A | ddress (if different t | rom stree | et address) |
| U.S. A | Army Fort Carson | | | | | | | | | |
| <u>Street</u> 1638 I | Elwell Street, Bldg 6236 | | | Mailing NA | Address | | | | | |
| City/Co | ounty/State/Zip Code | | | City/Sta | te/Zip Co | ode | | •• | | Country (Non-US |
| ort C | arson El Pas | o CO 8 | 0913-4356 | | | | | | | |
| 4.2 | This report contains informat (Important: check a or b; che | | | n entire acility | в. [| Part of a facility | c. [| X A Federal facility | d. [| GOCO |
| 4.3 | Technical Contact Name | John Cloonan | 1 | | | | — | phone Number (ii 526-8004 | nclude a | area code) |
| | Email Address | john.cloonan@carson.an | my.mil | | | | • • | | | |
| 4.4 | Public Contact Name | John Cloonan | | | | | <u> </u> | phone Number (i 526-8004 | nclude a | area code) |
| 4.5 | SIC Code (s) (4 digits) | Primary 9711 | | \top | | | | _ | | |

Degrees

4.8

b.

SECTION 5. PARENT COMPANY INFORMATION

CO2210020150

NA

Latitude

Dun & Bradstreet

Number(s) (9 digits)

Name of Parent Company

4.6

4.7

b.

5.1

Minutes

EPA Identification Number

(RCRA i.D. No.) (12 characters)

Seconds

45

4.9

U.S. Department of Defense

Х

a. CO0021181

b. CO0034771

Longitude

Facility NPDES Permit

Number(s) (9 characters)

Degrees

4.10

a. NA

b.

Minutes

47

Seconds

Underground Injection Well Code

(UIC) I.D. Number(s) (12 digits)

| | | | | | TRI Facility ID N | umber | | | | | | | |
|--|---|---------------------|---|--------------------|----------------------|----------------------------|--|--|--|--|--|--|--|
| | • | EPA FORM | R | Ĺ | 00 1125-KTORUC | OM AF | | | | | | | |
| | PART II. CHEMIC | AL - SPEC | CIFIC INFORMATION | į | Toxic Chemical, | Category or Generic Name | | | | | | | |
| | | | | | Nitrate compoun | ds | | | | | | | |
| SEC | TION 1. TOXIC CHEMIC | AL IDENTITY | (Important: DO NOT co | omplete this | section if you c | ompleted Section 2 below.) | | | | | | | |
| | CAS Number (Important: Enter only or | ne number exactly | as it appears on the Section 313 list. Enter | category code | if reporting a chemi | cal category.) | | | | | | | |
| 1.1 | N511 | | | | | | | | | | | | |
| 1.2 | | Name (Important: | Enter only one name exactly as it appears | on the Section | 313 list.) | | | | | | | | |
| | Nitrate compounds | | | | | | | | | | | | |
| 1.3 Generic Chemical Name (Important: Complete only if Part 1, Section 2.1 is checked "Yes". Generic Name must be structurally descriptive.) NA | | | | | | | | | | | | | |
| Distribution of Each Member of the Dioxin and Dioxin-like Compounds Category. (If there are any numbers in boxes 1-17, then every field must be filled in with either 0 or some number between 0.01 and 100. Distribution should be | | | | | | | | | | | | | |
| 1.4 reported in percentages and the total should equal 100%. If you do not have speciation data available, indicate NA.) | | | | | | | | | | | | | |
| NΔ | 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 NA | | | | | | | | | | | | |
| | NA _ | | | | | | | | | | | | |
| | TION 2. MIXTURE COMP | | | | | ompleted Section 1 above.) | | | | | | | |
| 2.1 | NA | Supplier (Important | t: Maximum of 70 characters, including num | nbers, letters, s | paces, and punctua | ation.) | | | | | | | |
| 2507 | | | | | | | | | | | | | |
| SECI | (Important: Check a | | HE TOXIC CHEMICAL AT TH | IE FACILII | Y | | | | | | | | |
| 3.1 | Manufacture the toxic chi | emical: 3. | 2 Process the toxic chemica | d: 3.3 | Otherwise | use the toxic chemical: | | | | | | | |
| a. | X Produce b. In | nport | | • | | | | | | | | | |
| | If produce or import: | a. | . As a reactant | a. | . As a cher | nical processing aid | | | | | | | |
| c. | For on-site use/processing | ng b | . As a formulation componen | — , As a man | nufacturing aid | | | | | | | | |
| d. | For sale/distribution | С. | As an article component | c. | Ancillary | y or other use | | | | | | | |
| e. | As a byproduct | l d | . Repackaging | | | | | | | | | | |
| f. | X As an impurity | e. | . As an impurity | | | | | | | | | | |
| SECT | ION 4. MAXIMUM AMOU | NT OF THE | TOXIC CHEMICAL ONSITE A | AT ANY TI | ME DURING | THE CALENDAR YEAR | | | | | | | |
| 4.1 | 02 (Enter tw | o-digit code f | from instruction package.) | | | | | | | | | | |
| SECT | TION 5. QUANTITY OF TH | IE TOXIC CH | IEMICAL ENTERING EACH E | ENVIRON | MENTAL ME | DIUM ONSITE | | | | | | | |
| | | | A. Total Release (pounds/year*) (Enter range code or estimate**) | B. Basis (enter | of Estimate code) | C. % From Stormwater | | | | | | | |
| 5.1 | Fugitive or non-point air emissions | NA 🔀 | | | | | | | | | | | |
| 5.2 | Stack or point air emissions | NA X | | _ | | | | | | | | | |
| 5.3 | Discharges to receiving stream water bodies (enter one name | | 1 | | | | | | | | | | |
| | Stream or Water Body N | lame | | | | | | | | | | | |
| 5.3.1 | Colver Ditch | | 24938 | | М | NA NA | | | | | | | |
| 5.3.2 | | | | | | | | | | | | | |
| 5.3.3 | | | | | | | | | | | | | |

(example: 1,2,3, etc.)
* For Dioxin or Dioxin-like compounds, report in grams/year

and indicate the Part II, Section 5.3 page number in this box.

If additional pages of Part II, Section 5.3 are attached, indicate the total number of pages in this box

EPA Form 9350-1 (Rev. 2/2004) - Previous editions are obsolete.

TRI Facility ID Number **TFA FORM R** 609 13 FR TCR COMINA SCECIEIC INFORMATION (CONTINUED)

| FAIL | II. CHEMICAL - 3. L | CII I | CIMEOR | (INIW) | DIA (C | OIA I IN | | Toxic (| Chemical, Cate | gory, or Generic | c Name |
|---------------|---|-----------|--------------|-------------|------------|----------------------------|---------|----------|-------------------------|------------------|-------------------|
| | | | | | | | | Nitrate | compounds | | |
| SECTIO | ON 5. QUANTITY OF THE | TOXI | ССНЕМІ | CAL EN | TERIN | G EACH | ENVIR | NMEN | TAL MEDIU | M ONSITE | (Continued |
| | | NA | A. Total R | | _ | ear*) (ente r estimate) | r range | | of Estimate er code) | | |
| 5.4.1 | Underground Injection onsite to Class I Wells | X | | | | | | | | | |
| 5.4.2 | Underground Injection onsite to Class II-V Wells | X | | | | | | | | · | |
| 5.5 | Disposal to land onsite | | | | | | | | | | |
| 5.5.1.A | RCRA Subtitle C landfills | X | | | • | | | | | | |
| 5.5.1.B | Other landfills | X | | | | | | | | | |
| 5.5.2 | Land treatment/application farming | . X | | | | | | | | | |
| 5.5.3A | RCRA Subtitle C Surface Impoundments | X | | | | | | | | | |
| 5.5.3B | Other surface impoundments | _x | | | | | | | | | |
| 5.5.4 | Other disposal | X | | | | | | | | | |
| SECTIO | ON 6. TRANSFERS OF TH | IE TO | XIC CHE | /ICAL II | N WAS | TES TO | OFF-SI | TE LOC | ATIONS | | |
| 6.1 DIS | CHARGES TO PUBLICLY | OWI | NED TREA | ATMENT | r wor | KS (PO | ΓWs) | | | | |
| 6.1.A To | tal Quantity Transferred to | POTW | s and Bas | is of Est | timate | | | | | | |
| | Total Transfers (pounds/ye (enter range code** or estimate | - | | | 6.1.A | L2 Basis (enter | | ate | | | |
| | , | NA | | | | \ | / | | | | |
| 6.1.B. 1 | POTW Name NA | | | | - | **** | | | | | |
| POTW A | | | | • | | | | | | | |
| City | | | | State | <u> </u> | County | | | | Zip | |
| 6.1.B. | POTW Name | | | | | L | l . | | | | <u> </u> |
| POTW A | ddress | | | | | | | | | | |
| City | | | | State | | County | | | | Zip | |
| If additio | nal pages of Part II, Section 6. | 1 are at | tached, indi | icate the t | total nui | mber of pa | ıges | | | • | |
| in this bo | and indicate the Pa | rt II, Se | ction 6.1 pa | ge numb | er in this | s box | (6 | example: | 1,2,3, etc.) | | |
| SECTIO | ON 6.2 TRANSFERS TO C | THEF | R OFF-SIT | E LOCA | ATIONS | s | | | | · | |
| 6.2. <u>1</u> | Off-Site EPA Identification N | umber | (RCRA ID | No.) | | NA | | | | | |
| Off-Site L | ocation Name NA | | | | | | | | | | |
| Off-site A | ddress | | | | | | | | | | |
| City | 1 | State | • | County | | | | | Zip | | ountry Ion-US) |
| Is location | n under control of reporting facilit | y or par | ent compan | y? | | | | | Yes | | No |

* For Dioxin or Dioxin-like compounds, report in grams/year

No

Yes

^{**} Range Codes: A= 1- 10 pounds; B= 11- 499 pounds; C= 500 - 999 pounds.

| | | | | | _ | | | | TRI F | acility ID Num | ber | | | |
|--|-----------------|------------------------------|------------------|-------------|----------------------|--------------------|-----------|----------------------------------|--|--|------------|--------------------------------|----------|--|
| | | | CPA | ORM | R | | | | £ 2! 13 | FRICIR DOM | AF. | | | |
| PARTII. CH | Elvii | CAL - SF | PLCIF | IC INF | ũΚM | ATION | C | ONTINUED) | ſoxic | Chemicai, Ca | negory, or | Generic Nam | ne | |
| | | | | | | | | | Nitrate | compounds | | | | |
| SECTION 6.2 | TRA | NSFERS | το οτι | HER OF | F-SIT | E LOCAT | ION | IS (Continued) | | | | | | |
| A. Total Transfe (enter range c | ers (p ode** | ounds/year*) or estimate) | | | Basis of enter co | f Estimate ode) | | | C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code) | | | | | |
| 1. | | | | 1. | | | | | 1. | | | | | |
| 2. | | | | 2. | | | | | 2. | | | | | |
| 3. | | | | 3. | | | | | 3. | | | | | |
| 4. | | | | 4. | | | | | 4. | | | | | |
| 6.2. Off | f-Site | EPA Identifi | cation N | lumber (| RCRA | D No.) | | , , | | | | | | |
| Off-Site location | Name | | | | | | | | | | | | | |
| Off-site Address | | | | | | | | | | | | | _ | |
| City | | | | State | | County | | | | Zip | | Country (Non-US) | | |
| Is location und | er cor | ntrol of repo | rting fac | ility or pa | rent co | mpany? | | | | Yes | | No | | |
| A. Total Transfe (enter range | | | | | Basis of enter co | f Estimate ide) | | | C. Type of Waste Treatment/Disposal/ Recycling/Energy Recovery (enter code) | | | | | |
| 1. | | | | 1. | | | | | 1. | | | | | |
| 2. | | | | 2. | | | | | 2. | | | | | |
| 3. | | | | 3. | | | | | 3. | | | | | |
| 4. | | | | 4. | | | | | 4. | | | | | |
| SECTION 7A | . ON | ISITE WAS | STE TR | EATME | NT M | THODS | ANI | DEFFICIENCY | | | | | | |
| Not App | licable | | | | | treatment is | | lied to any hemical category. | | | | | | |
| a. General Waste Stream (enter code) | | b. Waste Tre [enter 3-cl | | | Sequen | ce | | Concentration Ef | | d. Waste Treatment Efficiency Estimate | | e. Based on Operating Data? | | |
| 7A.1a | 7A.1b | | 1 | B11 | 2 | B21 | | 7A.1c | | 7A.1d | | 7A.16 | | |
| W | 3 6 | P11 | 4 7 | C46 | 5 8 | NA | \exists | 03 | | 90 % | , ; | Yes | No | |
| 7A.2a | 7A.2b | | 1 | | 2 | | | 7A.2c | | 7A.2d | - | 7A.26 | | |
| 1 A.2a | 3 | <u></u> | 1 4 | | - 5 | | \neg | | | % | | Yes | No | |
| | 6 | | 7 | | 8 | | \neg | | İ | 70 | ` | | | |
| 7A.3a | 7A.3b | | 1 | • | 2 | | | 7A.3c | | 7A.3d | | 7A.36 | 9 | |
| | 3 [| |] 4 [| | 5 | | | | | % | | Yes | No | |
| | 6 | | 7 | | 8 | | | | | /0 | | | | |
| 7 A .4a | 7A.4b | <u> </u> | , 1 | | 2 | | ┙ | 7A.4¢ | | 7A.4d | _ | 7 A .46 | . | |
| | 3 4 | | | | 5 8 | | - | | | % | | Yes | No | |
| 7A.5a 7A.5b 1 | | | | | 2 | | + | 7A.5c | 7A.5d | | | 7A.5e | | |
| 1 M.34 | 3 | | ا ₄ ا | | ے 5 | | \dashv | 17.50 | _ | | | Yes | No | |
| | 6 | | 7 | | J 8 | | \dashv | | | % | · | | | |
| If additional pag | | Part II, Section | | are attac | | dicate the | total | number of pages i | n this box | | <u> </u> | | | |

and indicate the Part II, Section 6.2/7A page number in this box:

(example: 1,2,3, etc.)

^{*} For Dioxin or Dioxin-like compounds, report in grams/year

| rage voi c |
|--|
| TRI Facility ID Number |
| 30 SANTE TICH COMIMA. |
| roxic Chartical, Catagory, or Contrib Name |
| Nitrate compounds |

| | EPA F | 30 XLTrr Tith COM W/. | | | | | | | |
|---|--|--|------|---------------------------|----------------------------|-------------------|--------------------------------|--|--|
| PA. | RT II. CHEMICAL SPACIFIC | roxic Chartifoot, Category, or Contario Name | | | | | | | |
| , | | | | | | Nitrate compounds | | | |
| SECT | ION 7B. ON-SITE ENERGY RE | COVERY PROCESS | SES | | | | | | |
| X Not Applicable (NA) - Check here if no on-site energy recovery is applied to any waste stream containing the toxic chemical or chemical category. | | | | | | | | | |
| Energy Recovery Methods [enter 3-character code(s)] | | | | | | | | | |
| 1 3 | | | | | | | | | |
| SECTION 7C. ON-SITE RECYCLING PROCESSES | | | | | | | | | |
| X Not Applicable (NA) - Check here if no on-site recyling is applied to any waste stream containing the toxic chemical or chemical category. | | | | | | | | | |
| Recycling Methods [enter 3-character code(s)] | | | | | | | | | |
| 1 2 3 4 : 5 | | | | | | | | | |
| 6 | 7 | 8 9 | | | | 10 | | | |
| SECTION 8. SOURCE REDUCTION AND RECYCLING ACTIVITIES | | | | | | | | | |
| | | Column A Prior Year | | olumn B Reporting Year | Column C Following Year | San | Column D and Following Year | | |
| | | (pounds/year*) | 1 | nds/year*) | (pounds/year*) | Sec | (pounds/year*) | | |
| 8.1 | | | , | | | | | | |
| 8.1a | Total on-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills | NA | NA | | NA | NA | | | |
| 8.1b | Total other on-site disposal or other releases | 30176 | 249 | 38 | 31000 | | 32000 | | |
| 8.1c | Total off-site disposal to Class I Underground Injection Wells, RCRA Subtitle C landfills, and other landfills | NA | NA | | NA | NA | | | |
| 8.1d | Total other off-site disposal or other releases | NA | NA | | NA | NA | | | |
| 8.2 | Quantity used for energy recovery onsite | NA | NA | | NA | NA | | | |
| 8.3 | Quantity used for energy recovery offsite | NA | NA | | NA | NA | | | |
| 8.4 | Quantity recycled onsite | NA | NA | | NA | NA | | | |
| 8.5 | Quantity recycled offsite | NA | NA | | NA | NA | | | |
| 8.6 | Quantity treated onsite | 410985 | 3396 | 554 | 420000 | 4 | 30000 | | |
| 8.7 | Quantity treated offsite | NA | NA | | NA | NA | | | |
| 8.8 | Quantity released to the environment as a result of remedial actions, catastrophic events, or one-time events not associated with productionprocesses (pounds/year) NA | | | | | | | | |
| 8.9 | Production ratio or activity index | 0.83 | | | | | | | |
| | Did your facility engage in any source reduction activities for this chemical during the reporting year? If not, enter "NA" in Section 8.10.1 and answer Section 8.11. | | | | | | | | |
| 8.10 | Source Reduction Activities [enter code(s)] | Methods to Identify Activity (enter codes) | | | | | | | |
| 8.10.1 | NA | а. | | b. c. | | c. |). | | |
| 8.10.2 | | a. | | b. c. | | ¢. | ¢. | | |
| 8.10.3 | | a. | | b. c. | | ¢. | с. | | |
| 8.10.4 | | a. | | b. | | С. | | | |

Is additional information on source reduction, recycling, or pollution control activities included with this report ? (Check one Box)

Yes

No Х